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The vaccines division of sanofi-aventis Group

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**To:**  
**Examiner Sarvamangala Devi**  
**USPTO Art Unit 1645**  
**Fax: 571-273-8300**  
**Total Number of Pages (including this page) :**

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Facsimile Transmission No.: 1 of 5

11 June 2001

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. :	10/054,638	Confirmation No.:	9398
Applicant :	Robert P. Ryall		
Filed :	22 January 2002		
TC/A.U. :	1645		
Docket No. :	API-01-059-US		
Examiner :	Devi, Sarvamangala J N		
Title :	Multivalent Meningococcal Polysaccharide Protein Conjugate Vaccine		

**AMENDMENT AND RESPONSE TO THE OFFICE ACTION**  
**MAILED 12 DECEMBER 2007**

Respectfully,

Thomas J. Bordner  
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PTO/SB/97 (01-08)

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PQ.  
21. APPENDIX 16 (8)

PQ. 1. FAX COVER (1)	PQ. 4. APPENDIX 1 (2)	PQ. 11. APPENDIX 6 (2)	PQ. 16. APPENDIX 11 (1)
2. PTO/SB/21 (1)	7. " 2 (1)	12. " 2(8)	17. " 12 (11)
3. PTO/SB/22 (2)	8. " 2 (6)	13. " 2(8)	18. " 13 (7)
4. RESPONSE (40)	9. " 4 (2)	14. " 9 (23)	19. " 14 (10)
5. PTO/SB/97 (1)	10. " 5 (5)	15. " 10 (14)	20. " 15 (3)

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TRANSMITTAL  
FORM

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Application Number	10/054,638
Filing Date	22 JAN 2002
First Named Inventor	ROBERT P. RYALL
Art Unit	1645
Examiner Name	Devi, SARVAMANGALA JN
Attorney Docket Number	API-01-059-US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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<small>Remarks</small> <b>RESPONSE TO 12 DEC 2007 OFFICE ACTION</b>		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	SANDOZ PASTEUR, INC.		
Signature	<i>Tom J. Bernier</i>		
Printed name	THOMAS J. BERNIER		
Date	11 JUN 2008	Reg. No.	47,436

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Typed or printed name	THOMAS J. BERNIER	Date	11 JUN 2008

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